Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

19/742193

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE C			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			34 minus 20=		• 14			X\$ 9=		OR	X\$18=	252
INDEPENDENT CLAIMS			7 m	inus 3 =	4			X40=		OR	X80=	320
MU	LTIPLE DEPEN	RESENT					+135=			+270=	320	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR OR	TOTAL	1282
CLAIMS AS AMENDED - PART II									<u> </u>	J 0	OTHER	
		(Column 1)		(Colu	mn 2)	2) (Column 3) SI			ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLIIPLE DE	\ \	CLAIM			+135=		OR	+270=	
		•				0 .		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)									•	ADDIT. FEET	
AMENDMENT B	1011	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	***	CL AIM	= [-]		X40=		OR	X80=	
	ringi Phese	NTATION OF MI	JEHIPLE DE	PENDEN	CLAIN	<u>' </u>	. [+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	,	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN [*]	T CLAIM		⋏			UH		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
		nber Previously Pa					er fou	nd in the app	ropriate box	k in coi	umn 1.	